| Electronic Pate                         | ent App  | lication Fee                                | Transm   | ittal  |                         |  |
|---|----------|---|----------|--------|-------------------------|--|
| Application Number:                     | 10       | 10577359                                    |          |        |                         |  |
| Filing Date:                            | 21-      | 21-Feb-2007                                 |          |        |                         |  |
| Title of invention:                     | Ар       | Apparatus for Predicting Bone Fracture Risk |          |        |                         |  |
| First Named Inventor/Applicant Name:    | Jer      | Jennifer Susan Gregory                      |          |        |                         |  |
| Filer:                                  | Do       | Donald R. Studebaker/Keiko Higuchi          |          |        |                         |  |
| Attorney Docket Number:                 | 74       | 745691-43                                   |          |        |                         |  |
| Filed as Large Entity                   | •        |   |          |        |                         |  |
| U.S. National Stage under 35 USC 371 Fi | ling Fee | s   |          |        |                         |  |
| Description                             |          | Fee Code                                    | Quantity | Amount | Sub-Total ii<br>USD(\$) |  |
| Basic Filing:                           |          |   |          |        |                         |  |
| Pages:                                  |          |   |          |        |                         |  |
| Claims:                                 |          |   |          |        |                         |  |
| Miscellaneous-Filing:                   |          |   |          |        |                         |  |
| Petition:                               |          |   |          |        |                         |  |
| Patent-Appeals-and-Interference:        |          |   |          |        |                         |  |
| Post-Allowance-and-Post-Issuance:       |          |   |          |        |                         |  |
| Extension-of-Time:                      |          |   |          |        |                         |  |
| Extension - 2 months with \$0 paid      |          | 1252  | 1        | 490    | 490                     |  |

| Description    | Fee Code          | Quantity | Amount | Sub-Total in<br>USD(\$) |
|----------------|-------------------|----------|--------|-------------------------|
| Miscellaneous: |                   |          |        |                         |
|                | Total in USD (\$) |          |        | 490                     |